

SERIAL NUMBER 09/387,747	FILING DATE 08/31/99	CLASS 395	GROUP ART UNIT 2762	ATTORNEY DOCKET NO. AND1P1229
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APPLICANT

MICHEL K. BOWMAN-AMUAH, COLORADO SPRINGS, CO.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*  
VERIFIED

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*  
VERIFIED

\*\*FOREIGN APPLICATIONS\*\*\*\*\*  
VERIFIED

IF REQUIRED; FOREIGN FILING LICENSE GRANTED 09/17/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no Verified and Acknowledged <u>Examiner's Initials</u> <u>Initials</u>	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CO	SHEETS DRAWING 14	TOTAL CLAIMS 15	INDEPENDENT CLAIMS 3
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ADDRESS

HICKMAN STEPHENS & COLEMAN LL[  
PO BOX 52037  
PALO ALTO CA 94303-0746

TITLE

SYSTEM, METHOD AND ARTICLE OF MANUFACTURING FOR A DEVELOPMENT  
ARCHITECTURE FRAMEWORK

FILING FEE RECEIVED  \$890	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 2954

<b>SERIAL NUMBER</b> 09/387,747	<b>FILING DATE</b> 08/31/1999 <b>RULE</b>	<b>CLASS</b> 395	<b>GROUP ART UNIT</b> 2122	<b>ATTORNEY DOCKET NO.</b> AND1P1229	
<b>APPLICANTS</b> MICHEL K. BOWMAN-AMUAH, COLORADO SPRINGS, CO;					
** CONTINUING DATA *****					
** FOREIGN APPLICATIONS *****					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 09/17/1999					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no		<b>STATE OR COUNTRY</b> CO	<b>SHEETS DRAWING</b> 14	<b>TOTAL CLAIMS</b> 15	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance					
Verified and Acknowledged _____ Examiner's Signature Initials					
<b>ADDRESS</b> HICKMAN STEPHENS & COLEMAN LL[ PO BOX 52037 PALO ALTO ,CA 943030746					
<b>TITLE</b> SYSTEM, METHOD AND ARTICLE OF MANUFACTURING FOR A DEVELOPMENT ARCHITECTURE FRAMEWORK					
<b>FILING FEE RECEIVED</b> 968	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees		
			<input type="checkbox"/> 1.16 Fees ( Filing )		
			<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )		
			<input type="checkbox"/> 1.18 Fees ( Issue )		
			<input type="checkbox"/> Other _____		
			<input type="checkbox"/> Credit		